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15,000 PHYSICIANS, 5,000 DENTISTS MADE ELIGIBLE FOR DISCHARGE

In line with its policy of returning doctors and dentists to civilian life as rapidly as the Army's medical needs decline, the War Department has made an additional group of 15,000 physicians and 5,000 dentists eligible for discharge.

Announcement of the new eligibility standards was made by Secretary of War Robert P. Patterson at the same time that he received a report from Major General Norman T. Kirk, The Surgeon General, showing that discharges of Army doctors were now running six weeks ahead of the schedule announced on September 14. Discharges of dentists are four weeks ahead of schedule.

Since V-E Day, more than 15,000 physicians have been released from the Army. Under the original schedule, 13,000 were to have been returned to private practice by January 1. The 15,000 already released represent nearly one-third of the total number in the Army at the time of the German surrender. With the additional group made eligible by this recent announcement, two-thirds of the physicians in the Army as of V-E Day will be eligible to resume civilian practice.

Release of dentists since Germany's defeat totals more than 3,500. The original schedule called for the release of this number by January 1. The peak strength of the Dental Corps was 15,000. The 8,500 dentists discharged or made eligible under the new standards represent more than 55 per cent of this strength

To effect the additional discharges, the critical score for physicians and dentists has been reduced from 80 to 70, effective immediately. The score of 70 for medical personnel is 3 points below the December 1 score for officers in other branches of the Army, and is designed to insure the speediest possible release of men needed in their home communities to provide medical care to the civilian population.

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MORE

15,000 PHYSICIANS, 5,000 DENTISTS MADE ELIGIBLE FOR DISCHARGE (Continued)

The time factor for physicians and dentists has also been cut. Instead of service prior to Pearl Harbor, medical personnel will now be eligible for release if they have had 42 months of honorable service. This compares with a requirement of four years and three months service for officers outside the Medical Department. In addition, any physician or dentist who is 48 years of age to his nearest birthday is eligible to return to civilian life.

The new standards will apply to all Medical Corps officers except for those in certain scarce categories. For plastic surgeons; eye, ear and nose specialists; orthopedic surgeons and internal medicine specialists, the discharge requirement will be 80 points or continuous service since Pearl Harbor. A requirement of 70 points or 45 months service has been established for gastroenterologists; cardiologists, urologists, dermatologists, anaesthetists, psychiatrists, general surgeons, physical therapy officers, radiologists and pathologists.

The number of doctors in these categories is relatively small but they are essential to the effective care of the 115,000 sick and wounded rationts returned from overseas who are now in Army General Hospitals in this country. In the case of all Medical Department officers, provision is made for their retention on duty for a period of not more than 90 days if their services are essential and no replacement is available.

Secretary Patterson has directed that transportation priority be given to medical personnel eligible for return from Europe and the Pacific in order that there may be no delay in their arrival in this country. He has also designated two officers to go to Europe as his personal representatives to make an exhaustive investigation of the release of medical officers there. A similar investigation was recently completed in the Pacific area.

The liberalized standards announced today apply not only to doctors and dentists but to nurses and other Medical Department personnel. The point score for nurses has been cut from 35 to 25 and the discharge age from 35 to 30. Nurses will also be eligible for discharge after two years of service. Those on duty in the United States who are classed as limited service have been added to the list of those qualified for discharge. It is estimated that this will make 12,500 nurses eligible for release, in addition to the 27,000 who have already been qualified to return to civilian life. Twenty-two thousand nurses have been discharged to date. The peak strength of the Army Nurse Corps was 57,000.

For officers of the Medical Administrative Corps the score has been dropped from 70 to 60, and the pre-Pearl Harbor service requirement has been eliminated and the time of service required for discharge cut to 42 months. The age requirement stays at 42 for MAC officers. Four thousand officers are made eligible for discharge under the new standards.

15,000 PHYSICIANS, 5,000 DENTISTS MADE ELIGIBLE FOR DISCHARGE (Continued)

The score for physical therapists has been reduced from 40 to 25 and the age requirement from 40 to 30. Two years of service will also qualify a physical therapist for discharge. Five hundred women officers are affected.

Three hundred additional dietitians have been made eligible to leave the Army by a cut in their score from 40 points to 30 and in their age requirement from 40 to 35.

Officers of the Sanitary Corps will need 60 points for discharge, instead of 70. They will also qualify for release if they have had 42 months of service or are 42 years old. For officers of the Veterinary Corps the score has been cut from 80 to 70. It is estimated that 350 Sanitary Corps officers and 400 Veterinary Corps officers will leave the service as a result of the liberalized rules. The following chart shows the revised Medical Department criteria:

Corps	ASR	Service	Age
Med. Corps	70	42 mo.	48
-Dental "	70	42 "	48
Med. Admin. Corps	60	42 "	42
*Nurses	25	24 "	30
*Phys. Therapists	25	24 "	30
*Dietitians	30	not a factor	35
San. Corps	60	42 mo.	42
Vet. Corps	70	42 "	42

\*Married or have dependents or are limited service in the U.S. are eligible for separation, regardless of points, length of service, or age.

BERT SHEPARD ASSIGNED TO THE OFFICE OF THE SURGEON GENERAL

First Lieutenant Bert Shepard, who attracted nation-wide attention last summer when he resumed his professional baseball career as pitcher for the Washington Senators three days after receiving his GI artificial leg from Walter Reed General Hospital, has re-entered the service at the request of The Surgeon General to aid in a program designed to help amoutees get the greatest use from their prostheses.

In May 1944, Lieutenant Shepard's P-38 was shot down over Germany. He suffered the loss of the lower part of his right leg, the operation being performed by German surgeons. After eight months in German hospitals and prison camps, he returned to the United States aboard the Gripsholm in February of this year.

Wearing a crude artificial leg fashioned from Red Cross materials by a fellow Canadian prisoner, Lieutenant Shepard was sent to Walter Reed General Hospital, where he received a GI prosthesis. Within three days after his fitting, he was working out with the Washington Senators and later signed with them. He plays football and has been clocked in the 100-yard dash at 12.05 seconds. He is the wearer of the Distinguished Flying Cross, Air Medal with three clusters and the Purple Heart.

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### SECRETARY OF WAR ORDERS STUDY ON DOCTORS AND DENTISTS RELEASE SITUATION

Personal representatives of the Secretary of War have departed for Europe to make an exhaustive study on the release of Army doctors and dentists, Major General Norman T. Kirk, The Surgeon General of the Army, has announced.

Colonel Polling R. Powell, Jr., of the Legislative and Liaison Division, of the War Department General Staff, and Colonel Durward G. Hall, Chief of Personnel Service of The Surgeon General's Office, who have been appointed to serve as personal representatives of the Secretary of War, left Washington December 1 to visit all European areas where Army doctors and dentists are stationed.

Colonel Powell and Colonel Hall have been given full power by the Secretary of War to make a complete investigation of all pertinent facts relating to Army doctors and dentists so that all necessary steps can be taken to expedite the return of all doctors who can be spared.

A similar investigation was recently completed in the Pacific area.

They will determine the medical and dental strength now necessary for each overseas theater so that all surplus professional officers can be immediately shipped out and either be released or assigned to replace doctors who are eligible for release.

Plans are under way for the issuance of radio directives for the return of surplus personnel, and the highest transportation priority will be arranged in order to speed up this program.

In addition to studying the needed strength of doctors in each area, the Secretary of War's representatives will also investigate if there has been any undue delay in returning doctors who have been declared surplus and if so, make recommendations for the immediate correction of such situations.

Another phase of the study will be the determination of number of hospital beds needed to meet present conditions in the European theaters with the idea of releasing unnecessary beds.

An investigation is also planned in this country of Service Forces, Ground Forces and Air Forces installations to make sure that medical and dental staffs are cut as rapidly as their work loads permit, and the discharge criteria are kept adjusted so that those doctors who are actually surplus will be released at once.

In the meantime, The Surgeon General's Office announced that doctors and dentists are continuing to be released as quickly as possible under the new release policy. Figures on the release of doctors at the end of the week of November 30th reached a total of 15,469, which is in excess of the 13,000 quota which had been set for the end of the year. For the same priod 3,539 dentists had been separated from the service.

#### MALARIA RELAPSE RATE DECLINING

The hospital admission peak for malaria relapses in the United States was reached in February 1945, with a total of approximately 6000 cases, and has been steadily declining since that time, according to a recent announcement by the Army Medical Department.

During 1943, when men began to return from tropical theaters of operations in increasing numbers, the total number of hospital admissions for malaria relapse reached 5,275. By 1944 it had jumped to almost five times that number -28,150, and in the first six months of this year the total was 30,420.

It is believed, however, that the return of troops from malaria-ridden areas will not appreciably affect the downward trend of admissions, for a large proportion of original personnel already has been replaced and returned. Units and replacements sent to these Pacific-Asiatic regions after the middle of 1943 are not expected to show as high rates of infection as those of earlier groups.

## SIX MEDICAL AID MEN GET CONGRESSIONAL MEDAL OF HONOR

World War II has produced six Army Medical Department heroes, who have received the Congressional Medal of Honor, the highest award given for heroism in action, the Office of The Surgeon General has announced.

Technical Sergeant Lloyd C. Hawks, Park Rapids, Minnesota, Private First Class at the time of his award, was the first "Medic" to get the Congressional Medal of Honor in World War II. Surrounded by Germans on three sides and defying enemy machine gun fire only thirty yards away, Sergeant Hawks saved the lives of two seriously wounded riflemen and a medic who was injured while trying to reach them. While aiding the injured men, Sergeant Hawks received a scalp wound and suffered a splintered hip and arm from machine gun bursts. After dragging his comrades to safety with his good arm, he waited six hours for aid.

Two of the medals were awarded posthumously: One to Technician Fifth Grade Alfred L. Wilson, Fairchance, Pennsylvania, who was mortally wounded on a battlefield in France and refused to be evacuated, caring for his comrades' needs until he lost consciousness; and the other to Technician Fourth Grade Laverne Parrish, who was killed while ministering to the needs of the wounded under intense enemy fire in the Southwest Pacific Area.

Three others receiving the award were: Private First Class Desmond T. Doss, Lynchburg, Virginia, who saved the lives of many men on the battlefields of Guam, Levte, and Okinawa; Private Harold 1. Garman, Albion, Illinois, who risked his life to swim the Seine and tow a boat of helpless wounded to shore; and Corporal Thomas J. Kelly, Brooklyn, New York, who made ten trips through heavy enemy fire to save the lives of seventeen wounded men and guide seven others to safety.

### NEBRASKA REPRESENTATIVE MILLER PRAISES WORK OF MEDICAL SERVICES

The following statement, given by the Honorable A. L. Miller of Nebraska in the House of Representatives, is reprinted from the November 23, 1945 Congressional Record:

'Mr. Speaker, the record of the medical men and the medical service in this war is outstanding. It has never been equalled by any Army in any war. There were over 570,000 wounded in World War II, of whom 360,000 were returned to some type of duty. There were some 25,000 or approximately four per cent who died of wounds.

"In World War II, only six men in each 10,000 died of disease each year. This is a lower death rate in disease than that of civilians in the same age group here in the United States; yet these men lived in every part of the world under adverse physical and sanitary conditions. In World War I, 165 in each 10,000 died each year of disease, and these men were serving only in the United States and in Europe; the death rate in the Union Army in the Civil War was 712 per 10,000.

"The death rate from pneumonia has been reduced from 24 per cent in World War I to six-tenths per cent in this war. The death rate for meningitis has been reduced to four per cent in this war as compared to 34 per cent in World War I.

"I am sure, Mr. Speaker, that the Congress and the country can look with considerable pride upon this fine record of the medical service.

There is no record in civil life or elsewhere to compare with this, and certainly a good job has been done in preventative medicine, as well as in the treatment of disease."

### OFFICE OF THE SURGEON GENERAL REPRESENTED AT GORGAS INSTITUTE MEETING

Major General Norman T. Kirk, Surgeon General of the Army, and Brigadier General James S. Simmons, Chief of Preventive Medicine Service, Office of The Surgeon General, both board members of the Gorgas Memorial Institute of Tropical and Preventive Medicine, recently participated in an election of three new directors to the Institute.

The three included: Spruille Braden, former ambassador to Argentina and now Assistant Secretary of State, Rear Admiral H. W. Smith, Chief of the Navy Research Division of the Fureau of Medicine and Surgery, and Colonel R. G. Prentiss, Jr., Chairman of the Army Medical Research and Development Board.

#### GENERAL SIMMONS GUEST OF HONOR AT DINNER

Erigadier General James S. Simmons, Chief of Preventive Medicine Service, Office of The Surgeon General, was the guest of honor at a dinner recently given by Colonel Richard P. Strong, Director of Tropical Medicine of the Army Medical School. The guests included some of the nation's leading scientists and military doctors.

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#### CANADIAN SURGEON GENERAL VISITS OFFICE OF THE SURGEON GENERAL

Major General C. P. Fenwick, Director General of Medical Services, Royal Canadian Army Medical Corps, recently completed an inspection tour of the various divisions of the Office of The Surgeon General of the Army.

The purpose of this visit was to make a first hand study of the organizational plans for the Medical Department of the postwar Army, with the aim of preparing similar plans for the Canadian Army.

During his five-day stay, General Fenwick also inspected installations at the Army Medical School, Walter Reed General Hospital, and several Naval medical installations in Washington.

MAJOR HENRY B. GMYNN NEW DIRECTOR OF RECONDITIONING CONSULTANTS DIVISION

Major Henry B. Gwynn, formerly Deputy Director of the Reconditioning Consultants Division, Office of The Surgeon General, has been appointed Director of that division, succeeding Colonel Augustus Thorndike, who is returning to civilian practice of orthopedic surgery in Boston, Massachusetts.

A member of the Army Medical Corps since 1942, Major Gwynn served as Medical Consultant in the Southwest Pacific for two years before his assignment to the Office of The Surgeon General.

In civilian life Major Gwynn practiced internal medicine and was Associate Professor of Clinical Medicine at Georgetown University School of Medicine, Washington, D. C. He was Chairman of the Public Relations Committee of the District of Columbia Medical Society and organized the Diagnostic Clinic at the Washington Medical Center.

FRENCH MEDICAL OFFICERS TO VISIT ARMY MEDICAL INSTALLATIONS IN U. S.

Three French medical officers, Commandant Louis Pages, Commandant Francis Borrey, and Commandant Arquie, are making plans to spend four months in the United States, seven and a half weeks of which will be spent in touring Army Medical Department installations.

The itinerary includes a ten-day stay at Moore General Hospital, Swannanoa, North Carolina, for the study of methods of treatment of tropical diseases; and a three-week study at the laboratories and in organization and treatment at "alter Reed General Hospital, "ashington, D. C.

They will then visit the Food and Nutrition Laboratories, Chicago, Illinois, for a two-week observation of research in nutrition and food packaging. A week's study will be spent at Fort Bragg, North Carolina, for an observation of methods of treatment employed there. A discussion of findings at the U.S. Respiratory Disease Laboratory and observation of water and sewage systems will conclude their trip.

MISS ELIZABETH MESSICK NEW DIRECTOR OF OCCUPATIONAL THERAPY DIVISION

Miss H. Elizabeth Messick, former Director of Occupational Therapy for the District of Columbia Health Department, has been appointed Director of the Occupational Therapy Branch, Reconditioning Consultants Division, Office of The Surgeon General, succeeding Mrs. Winifred C. Kahmann.

A graduate in occupational therapy courses affiliated with the Sheppard Enoch Pratt Hospital, Towson, Maryland, Johns Hopkins University, and Walter Reed General Hospital, Miss Messick served as a member of the Walter Reed staff from 1933 to 1939.

In 1939 she organized and developed a department of Occupational Therapy under the Bureau of Maternal and Child Velfare of the District of Columbia Health Department. In connection with previous courses, Miss Messick had clinical affiliations with Johns Hopkins Hospital and the Presbyterian Hospital, Medical Center, New York.

She came to the Office of The Surgeon General in 1944, where she was appointed Assistant Chief of the Occupational Therapy Branch, Reconditioning Consultants Division.

Mrs. Kahmann is returning to her former position as Director of Occupational Therapy at the Indiana University Medical Center where she served eighteen years before coming to Washington.

